

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/618,102  
Applicant : Richard S. ORR  
Filed : July 17, 2000  
TC/A.U. : 2661  
Examiner : Nguyen, Van Kim T.  
Confirmation No. : 7328  
Docket No. : 0918.0095C  
Customer No. : 27896  
Title : Chip-Synchronous CDMA Multiplexer and Method  
Resulting in Constant Envelope Signals

RECEIVED

OCT 25 2004

Technology Center 2600

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**TRANSMITTAL LETTER**

Enclosed are the following documents in response to the Office Action, mailed July 20, 2004, for the above-identified application:

- Amendment (12 Pages)
- Postcard Receipt
- Petition for Extension of Time
- Request for Approval of Drawing Changes
- Information Disclosure Statement (3 pages), Form PTO/SB/08 (1 page), copies of 2 patent literature documents, and a copy of the Supplementary European Search Report for Appl. No EP 00 94 8747 (7 pages).
- Notice of Appeal
- Associate Power
- Revocation and New Power
- Change of Address
- Return receipt postcard
- Check No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ for the total fee as calculated below
- Other:

The fee has been calculated as follows:

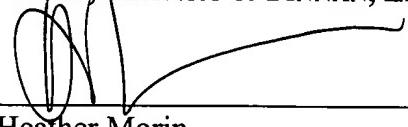
|   | NO. OF CLAIMS PREVIOUSLY PAID FOR | NO. OF CLAIMS CURRENTLY PENDING | EXTRA CLAIMS | RATE      | FEE           |
|---|-----------------------------------|---------------------------------|--------------|-----------|---------------|
| Total Claims  | 43                                | - 37 =                          | 0            | x \$18.00 | \$0.00        |
| Independent Claims  | 7                                 | - 7 =                           | 0            | x \$88.00 | \$0.00        |
| If multiple dependent claims are presented, add \$290.00  |                                   |                                 |              |           | 0.00          |
| Total Amendment Fee   |                                   |                                 |              |           | \$0.00        |
| <input type="checkbox"/> Applicant claims Small Entity Status (subtract 50% of Total Application Fee) |                                   |                                 |              |           |               |
| Other fees: (specify)   |                                   |                                 |              |           |               |
| <b>TOTAL FEE DUE</b>  |                                   |                                 |              |           | <b>\$0.00</b> |

- A check for the total fee is attached.
- Please charge \$ to Deposit Account No. 05-0460 for the total fee. This paper is being submitted in duplicate.
- The Commissioner is hereby authorized to charge any additional appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 05-0460.

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Hand-delivered: 10/20/04

By:

Respectfully submitted by  
**EDELL, SHAPIRO & FINNAN, LLC**  
  
Heather Morin  
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